

Disclosure Report Cover

Amendment

☒ Yes ☐ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.

Do not use this form to update information.

1. Committee Information										
a. Full Name			c. ID Number							
COMMITTEE TO ELECT DON MOFFITT										
b. Mailing Address (include City, State and Zip Code)			d. Date Filed							
PO BOX 1168 DURHAM, NC 27702			10/24/2008							
			e. Phone Number							
2. Report Year	3. Period Start Date (mm/dd/yy)	4. Period End Date (mm/dd/yy)	5. Treasurer Full Name							
2008	07/01/2008	10/18/2008	MARILYN BUTLER							
6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)								
<input checked="" type="checkbox"/> Candidate Campaign <input type="checkbox"/> Party <input type="checkbox"/> PAC <input type="checkbox"/> Referendum <input type="checkbox"/> Independent Expenditure <input type="checkbox"/> Joint Fundraiser <input type="checkbox"/> Legal Expense Fund		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">Municipal</td> <td style="width:33%;">State/County</td> <td style="width:33%;">Referendum</td> </tr> <tr> <td> <input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special </td> <td> <input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input checked="" type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special </td> <td> <input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special </td> </tr> </table>			Municipal	State/County	Referendum	<input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input checked="" type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special
Municipal	State/County	Referendum								
<input type="checkbox"/> Organizational <input type="checkbox"/> Thirty-five day <input type="checkbox"/> Pre-primary <input type="checkbox"/> Pre-election <input type="checkbox"/> Pre-runoff <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational Quarterly <input type="checkbox"/> First <input type="checkbox"/> Second <input checked="" type="checkbox"/> Third <input type="checkbox"/> Fourth <input type="checkbox"/> Semi-annual <input type="checkbox"/> Mid Year <input type="checkbox"/> Year End <input type="checkbox"/> Final <input type="checkbox"/> Special	<input type="checkbox"/> Organizational <input type="checkbox"/> Pre-referendum <input type="checkbox"/> Final <input type="checkbox"/> Supplemental Final <input type="checkbox"/> Annual <input type="checkbox"/> Special								
7. Type of Fund (if applicable, check one)		10. Special Report Name								
<input type="checkbox"/> Booster Fund <input type="checkbox"/> Building Fund <input type="checkbox"/> Other:										
8. Number of Fundraisers this Report										
0										
11. Account Information		11. Account Information								
a. Financial Institution Full Name		a. Financial Institution Full Name								
MECHANICS & FARMERS BANK										
b. Purpose	c. Account Code	b. Purpose	c. Account Code							
CHECKING ACCOUNT	101									
	d. Period Begin Balance		d. Period Begin Balance							
	\$		\$							
CERTIFICATION										
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections.										
<u>MARILYN K BUTLER</u> Printed Name of Signer		<u>Marilyn Butler</u> Signature of Appointed Treasurer		<u>10/24/2008</u> Date						
FOR OFFICE USE ONLY										
Date Received:	<u>10/24/08</u>	Employee:	<u>MP</u>							
Date Postmarked:		Employee:								
Date Received:		Employee:								
Date Received:		Employee:								
<div style="border: 2px solid black; padding: 5px; display: inline-block;"> RECEIVED NOV 24 2008 </div>		Delivery Method <input type="checkbox"/> Normal Mail <input type="checkbox"/> Registered Mail <input checked="" type="checkbox"/> Hand Delivered <input type="checkbox"/> Electronically Filed <input type="checkbox"/> Signer has not received mandatory training								
Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information. You must amend the Statement of Organization (CRO-2100A-F) to make committee changes.										

Detailed Summary

Amendment

☒ Yes ☐ No

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
COMMITTEE TO ELECT DON MOFFITT		2008 Third Quarter			
Start of Election Cycle: January 1, 2008				Total this Reporting Period	Total this Election Cycle
4) Cash on Hand at Start				\$ 2,914.80	\$ 0.00
RECEIPTS					
5) Aggregated Contributions from Individuals		(CRO-1205)	\$ 0.00	\$ 829.07	
6) Contributions from Individuals		(CRO-1210)	\$ 0.00	\$ 21,337.20	
7) Contributions from Political Party Committees		(CRO-1220)	\$ 0.00	\$ 0.00	
8) Contributions from Other Political Committees		(CRO-1230)	\$ 0.00	\$ 100.00	
9) Loan Proceeds		(CRO-1410)	\$ 0.00	\$ 500.00	
10) Refunds/Reimbursements to the Committee		(CRO-1240)	\$ 0.00	\$ 0.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts		(CRO-1250)	\$ 0.00	\$ 0.00	
11b) Contributions from Not-For-Profit Organizations		(CRO-1250)	\$ 0.00	\$ 0.00	
11c) Outside Sources of Income		(CRO-1250)	\$ 0.00	\$ 0.00	
11d) Legal Expense Fund - Other Sources		(CRO-1270)	\$ 0.00	\$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c and 11d)			\$ 0.00	\$ 22,766.27	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures		(CRO-1310)	\$ 0.00	\$ 10,468.24	
13b) Contributions to Candidates/Political Committees		(CRO-1310)	\$ 550.00	\$ 550.00	
13c) Coordinated Party Expenditures		(CRO-1310)	\$ 0.00	\$ 0.00	
14) Aggregated Non-Media Expenditures		(CRO-1315)	\$ 0.00	\$ 67.10	
15) Loan Repayments		(CRO-1420)	\$ 0.00	\$ 500.00	
16) Refunds/Reimbursements from the Committee		(CRO-1320)	\$ 0.00	\$ 4,363.84	
17) In-Kind Contributions		(CRO-1510)	\$ 0.00	\$ 4,452.29	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)			\$ 550.00	\$ 20,401.47	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)			\$ 2,364.80	\$ 2,364.80	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees		(CRO-1330)	\$ 0.00		
21) Outstanding Loans (incl. ones from other campaigns)		(CRO-1430)	\$ 0.00		
22) Debts and Obligations owed by the Committee		(CRO-1610)	\$ 0.00		
23) Debts and Obligations owed to the Committee		(CRO-1620)	\$ 0.00		
24) Account Transfers Within the Committee		(CRO-1720)	\$ 0.00		
25) Administrative Support		(CRO-1710)	\$ 0.00	\$ 0.00	
26) Forgiven Loans		(CRO-1440)	\$ 0.00	\$ 0.00	
27) 48-Hour Notice Reports Sum		(CRO-2220)	\$ 0.00	\$ 0.00	
28) Contributions to be Refunded		(CRO-1215)	\$ 0.00	\$ 0.00	

Disbursements

Amendment
Pg 1 of 1 ☒ Yes ☐ No

Use this form to report expenditures from the committee for, operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)						2. ID Number
COMMITTEE TO ELECT DON MOFFITT						
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>						
<input type="checkbox"/> Operating Expenses <input checked="" type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures						
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) PAPAC 1821 GREEN ST SUITE 102 DURHAM, NC 27705				b. Coordinated Committee Name		d. Comments
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date		
				\$		200.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
101	Check	O	09/25/2008	\$ 200.00	POLITICAL ACTION COMMITTEE	
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) PAUL LUEBKE FOR STATE HOUSE 1507 OAKLAND AVE DURHAM, NC 27705				b. Coordinated Committee Name		d. Comments
				c. Level Registered (Specify)		
				<input type="checkbox"/> Federal <input type="checkbox"/> County: <input checked="" type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date		
				\$		250.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
101	Check	D	09/20/2008	\$ 250.00		
				\$		
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove						
a. Full Name, Mailing Address & Phone (include city, state, & zip) PRICE FOR CONGRESS COMMITTEE PO BOX 1986 RALEIGH, NC 27602				b. Coordinated Committee Name		d. Comments
				c. Level Registered (Specify)		
				<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
				e. Election Sum to Date		
				\$		100.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks	
101	Check	D	09/25/2008	\$ 100.00		
				\$		
5. Total only this Page						\$ 550.00
6. Total of ALL CRO-1310 Pages						
(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)						\$ 550.00
(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)						
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)						
7. Purpose Codes (List detailed expenditure code in (h.) above)						
A* - Media	B* - Printing	C* - Fundraising		D - To Another Candidate		
E - Salaries	F* - Equipment	G - Political Party		H* - Holding Public Office Expenses		
I - Postage	J - Donations	K* - Office Expenses		Other		